

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2024 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2024 or fiscal plan year beginning 10/01/2024 and ending 09/30/2025	
A	This return/report is for: ☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) _____
B	This return/report is: ☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here. ▶ ☐
D	Check box if filing under: ☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶ ☐

Part II	Basic Plan Information—enter all requested information
1a	Name of plan THE UNITY COUNCIL 403(B) PLAN
1b	Three-digit plan number (PN) ▶ 001
1c	Effective date of plan 10/17/1995
2a	Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) SPANISH SPEAKING UNITY COUNCIL OF ALAMEDA COUNTY 1900 FRUITVALE AVENUE, SUITE 2A OAKLAND, CA 94601
2b	Employer Identification Number (EIN) 94-1670490
2c	Plan Sponsor's telephone number 510-535-6900
2d	Business code (see instructions) 611000

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.			
Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.			
SIGN HERE	Filed with authorized/valid electronic signature.	05/29/2026	TERESA ESTRADA
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 590
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6a(1) 357 6a(2) 325 6b 90 6c 151 6d 566 6e 0 6f 566 6g(1) 406 6g(2) 415 6h 18
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
 2F 2G 2M 2T 3D 3H

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

9a Plan funding arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

- (1) ☒ **R** (Retirement Plan Information)
- (2) ☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- (3) ☐ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary
- (4) ☐ **DCG** (Individual Plan Information) – Number Attached _____
- (5) ☐ **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- (1) ☒ **H** (Financial Information)
- (2) ☐ **I** (Financial Information – Small Plan)
- (3) ☒ **A** (Insurance Information) – Number Attached 1
- (4) ☒ **C** (Service Provider Information)
- (5) ☐ **D** (DFE/Participating Plan Information)
- (6) ☐ **G** (Financial Transaction Schedules)

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2024 Form M-1 annual report. If the plan was not required to file the 2024 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 10/01/2024 and ending 09/30/2025		
A Name of plan THE UNITY COUNCIL 403(B) PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 SPANISH SPEAKING UNITY COUNCIL OF ALAMEDA COUNTY	D Employer Identification Number (EIN) 94-1670490	

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions	Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
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1 Coverage Information:

(a) Name of insurance carrier
NATIONWIDE LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
31-4156830	66869	570-80207	0	10/01/2024	09/30/2025

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid 432	(b) Total amount of fees paid 0
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3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
MORGAN STANLEY SMITH BARNEY LLC 1 NEW YORK PLAZA, 12TH FLOOR
NEW YORK, NY 10004

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
432	0	COMMISSIONS	4

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b Premiums paid to carrier **6b**

c Premiums due but unpaid at the end of the year **6c**

d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. **6d**
Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity
(3) ☒ other (specify) ▶ **GUARANTEED INVESTMENT**

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☒ guaranteed investment (4) ☐ other ▶

b Balance at the end of the previous year	7b	110808
c Additions: (1) Contributions deposited during the year (2) Dividends and credits..... (3) Interest credited during the year..... (4) Transferred from separate account (5) Other (specify below)..... ▶	7c(1)	22429
	7c(2)	11
	7c(3)	2421
	7c(4)	
	7c(5)	
(6) Total additions	7c(6)	24861
d Total of balance and additions (add lines 7b and 7c(6))	7d	135669
e Deductions:		
(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	
(2) Administration charge made by carrier.....	7e(2)	
(3) Transferred to separate account	7e(3)	
(4) Other (specify below)..... ▶	7e(4)	
(5) Total deductions	7e(5)	0
f Balance at the end of the current year (subtract line 7e(5) from line 7d).....	7f	135669

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
b ☐ Dental
c ☐ Vision
d ☐ Life insurance
e ☐ Temporary disability (accident and sickness)
f ☐ Long-term disability
g ☐ Supplemental unemployment
h ☐ Prescription drug
i ☐ Stop loss (large deductible)
j ☐ HMO contract
k ☐ PPO contract
l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received	9a(1)		
(2) Increase (decrease) in amount due but unpaid	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3))		9a(4)	0
b Benefit charges (1) Claims paid	9b(1)		
(2) Increase (decrease) in claim reserves	9b(2)		
(3) Incurred claims (add (1) and (2))		9b(3)	0
(4) Claims charged		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)		
(B) Administrative service or other fees	9c(1)(B)		
(C) Other specific acquisition costs	9c(1)(C)		
(D) Other expenses	9c(1)(D)		
(E) Taxes	9c(1)(E)		
(F) Charges for risks or other contingencies	9c(1)(F)		
(G) Other retention charges	9c(1)(G)		
(H) Total retention		9c(1)(H)	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. Specify nature of costs.	10b	

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2024
		This Form is Open to Public Inspection.

For calendar plan year 2024 or fiscal plan year beginning 10/01/2024 and ending 09/30/2025

A Name of plan THE UNITY COUNCIL 403(B) PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 SPANISH SPEAKING UNITY COUNCIL OF ALAMEDA COUNTY	D Employer Identification Number (EIN) 94-1670490

Part I	Service Provider Information (see instructions)
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You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

- a

Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).....

☒ Yes

☐ No
- b

If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
NATIONWIDE	ONE NATIONWIDE PLAZA COLUMBUS, OH 43215
95-2130882	

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
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2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

NATIONWIDE

ONE NATIONWIDE PLAZA
COLUMBUS, OH 43215

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
12 19 28 50 64 15 26 37 51 65 18 27 38 52	RECORDKEEPER	39868	Yes ☒ No ☐	Yes ☐ No ☒	0	Yes ☐ No ☒

(a) Enter name and EIN or address (see instructions)

MORGAN STANLEY SMITH BARNEY LLC

1 NEW YORK PLAZA, 12TH FL ANNUITY
NEW YORK, NY 10004

26-3415651

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
26 27 28 51 52	INVESTMENT ADVISOR	0	Yes ☒ No ☐	Yes ☐ No ☒	34033	Yes ☐ No ☒

(a) Enter name and EIN or address (see instructions)

FARMER & BETTS

6010 20TH ST E STE 1
FIFE, WA 98424

94-3322438

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
12 19 28 50 64 15 26 37 51 65 18 27 38 52	THIRD PARTY ADMINISTRATO	8632	Yes ☒ No ☐	Yes ☐ No ☒	0	Yes ☐ No ☒

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

PROACCOUNT

10 W NATIONWIDE BLVD
COLUMBUS, OH 43215

73-0988442

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
26 27 28 51 52	RECORDKEEPER	3690	Yes ☒ No ☐	Yes ☐ No ☒	0	Yes ☐ No ☒

(a) Enter name and EIN or address (see instructions)

MORGAN STANLEY SMITH BARNEY LLC

1 NEW YORK PLAZA, 12TH FL ANNUITY
NEW YORK, NY 10004

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
26 27 28 51 52	INVESTMENT ADVISOR	0	Yes ☒ No ☐	Yes ☐ No ☒	432	Yes ☐ No ☒

(a) Enter name and EIN or address (see instructions)

NATIONWIDE

31-4177100

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
26 27 28 51 52	RECORDKEEPER	94	Yes ☒ No ☐	Yes ☐ No ☒	0	Yes ☐ No ☒

Part I Service Provider Information (continued)

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
MORGAN STANLEY SMITH BARNEY LLP	26 52 27 28 51	34465

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
SPANISH SPEAKING UNITY COUNCIL 1900 FRUITVALE AVE OAKLAND, CA 94601 94-1670490	N/A

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
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(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
(complete as many entries as needed)

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
	For calendar plan year 2024 or fiscal plan year beginning 10/01/2024 and ending 09/30/2025	
	A Name of plan THE UNITY COUNCIL 403(B) PLAN	B Three-digit plan number (PN) 001
C Plan sponsor's name as shown on line 2a of Form 5500 SPANISH SPEAKING UNITY COUNCIL OF ALAMEDA COUNTY	D Employer Identification Number (EIN) 94-1670490	

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	4009	3756
(2) Participant contributions.....	1b(2)	1530	617
(3) Other	1b(3)	1125	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	8156	29120
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	38310	94245
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	10499653	12667708
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	110808	135669
(15) Other.....	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	10663591	12931115
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	0	0
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	10663591	12931115

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)	458256	
(B) Participants.....	2a(1)(B)	809552	
(C) Others (including rollovers).....	2a(1)(C)	166692	
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B), (C), and line 2a(2)	2a(3)		1434500
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)		
(B) U.S. Government securities.....	2b(1)(B)		
(C) Corporate debt instruments.....	2b(1)(C)		
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)	4612	
(F) Other.....	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F).....	2b(1)(G)		4612
(2) Dividends: (A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B), and (C).....	2b(2)(D)		0
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds.....	2b(4)(A)		
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B).....	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		1431937
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		2871049

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	588623	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		588623
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		3562
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	11340	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		11340
j Total expenses. Add all expense amounts in column (b) and enter total	2j		603525

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		2267524
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☒ Unmodified (2) ☐ Qualified (3) ☐ Disclaimer (4) ☐ Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) ☒ DOL Regulation 2520.103-8 (2) ☐ DOL Regulation 2520.103-12(d) (3) ☐ neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: **HOLTHOUSE CARLIN & VAN TRIGHT LLP**

(2) EIN: **95-4345526**

d The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1) ☐ This form is filed for a CCT, PSA, DCG or MTIA. (2) ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	☒	☐	700608
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	☐	☒	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	☐	☒	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	☐	☒	
e Was this plan covered by a fidelity bond?	☒	☐	500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	☐	☒	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	☐	☒	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	☐	☒	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	☒	☐	
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	☐	☒	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	☐	☒	
l Has the plan failed to provide any benefit when due under the plan?	☐	☒	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	☐	☒	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	☐	☐	

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? ☐ Yes ☒ No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☐ Yes ☐ No ☐ Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation		Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.		OMB No. 1210-0110 2024 This Form is Open to Public Inspection.	
For calendar plan year 2024 or fiscal plan year beginning 10/01/2024 and ending 09/30/2025					
A Name of plan THE UNITY COUNCIL 403(B) PLAN				B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 SPANISH SPEAKING UNITY COUNCIL OF ALAMEDA COUNTY				D Employer Identification Number (EIN) 94-1670490	
Part I Distributions					
All references to distributions relate only to payments of benefits during the plan year.					
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....				1	0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 04-2647786 31-4156830					
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.					
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year				3	
Part II Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)					
4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ☐ Yes ☐ No ☐ N/A					
If the plan is a defined benefit plan, go to line 8.					
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____					
If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.					
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)				6a	
b Enter the amount contributed by the employer to the plan for this plan year				6b	
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....				6c	
If you completed line 6c, skip lines 8 and 9.					
7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ☐ Yes ☐ No ☐ N/A					
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ☐ Yes ☐ No ☐ N/A					
Part III Amendments					
9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box..... ☐ Increase ☐ Decrease ☐ Both ☐ No					
Part IV ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.					
10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ☐ Yes ☐ No					
11 a Does the ESOP hold any preferred stock? ☐ Yes ☐ No					
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ☐ Yes ☐ No					
12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ☐ Yes ☐ No					
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.				Schedule R (Form 5500) 2024 v. 240311	

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment).....

14a

b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14b

c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14c

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year.....

15a

b The corresponding number for the second preceding plan year.....

15b

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year.....

16a

b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers.....

16b

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment..... ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment..... ☐

19 If the total number of participants is 1,000 or more, complete lines (a) and (b):

a Enter the percentage of plan assets held as:

Public Equity: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____%

High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: _____% Other: _____%

b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:

☐ 0-5 years ☐ 5-10 years ☐ 10-15 years ☐ 15 years or more

20 PBGC missed contribution reporting requirements. If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation.....

Part VII IRS Compliance Questions

21a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? ☐ Yes ☒ No

21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).

☐ Design-based safe harbor method

☐ "Prior year" ADP test

☐ "Current year" ADP test

☒ N/A

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter 07 / 24 / 2019 (MM/DD/YYYY) and the Opinion Letter serial number J500771A.

THE UNITY COUNCIL 403(b) PLAN
FINANCIAL STATEMENTS,
SUPPLEMENTAL SCHEDULES,
AND
INDEPENDENT AUDITOR'S REPORT
SEPTEMBER 30, 2025



THE UNITY COUNCIL 403(b) PLAN
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INDEPENDENT AUDITOR'S REPORT

To the Plan Committee of
The Unity Council 403(b) Plan:

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit

We have performed audits of the financial statements of The Unity Council 403(b) Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), as permitted by ERISA Section 103(a)(3)(C) ("ERISA Section 103(a)(3)(C) audit"). The financial statements comprise the statements of net assets available for benefits as of September 30, 2025 and 2024, and the related statement of changes in net assets available for benefits for the year ended September 30, 2025, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the Plan ("investment information") by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency ("qualified institution"), provided that the investment information regarding assets so held is prepared and certified to by the qualified institution in accordance with 29 CFR 2520.103-5 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

Management has obtained certifications from qualified institutions as of September 30, 2025 and 2024, and for the year ended September 30, 2025, stating that the certified investment information, as described in Note 4 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and on the procedures performed as described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report

- the amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America ("GAAP").
- the information in the accompanying financial statements related to assets held by and certified to by qualified institutions agrees to, or is derived from, in all material respects, the information prepared and certified by institutions that management determined meet the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America ("GAAS"). Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are required to be independent of the Plan and to meet our ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with GAAP, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern within one year after the date the financial statements are issued or available to be issued.

Management is also responsible for maintaining a current Plan instrument, including all Plan amendments, administering the Plan, and determining that the Plan's transactions that are presented and disclosed in the financial statements are in conformity with the Plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditor's Responsibilities for the Audit of the Financial Statements

Except as described in the *Scope and Nature of the ERISA Section 103(a)(3)(C) Audit* section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

Our audits did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information and to assess whether they are in accordance with the presentation and disclosure requirements of GAAP.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with GAAP.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that were identified during the audit.

Other Matter – Supplemental Schedules Required by ERISA

The supplemental schedules of Schedule H, Line 4i - Schedule of Assets (Held at End of Year) as of September 30, 2025 and the Schedule H, Line 4a - Schedule of Delinquent Participant Contributions for the year ended September 30, 2025 are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, including their form and content, are presented in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion

- the form and content of the supplemental schedules, other than the information in the supplemental schedules that agreed to or is derived from the certified investment information, are presented, in all material respects, in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.
- the information in the supplemental schedules related to assets held by and certified to by qualified institutions agrees to, or is derived from, in all material respects, the information prepared and certified by institutions that management determined meet the requirements of ERISA Section 103(a)(3)(C).



Long Beach, California
May 20, 2026

THE UNITY COUNCIL 403(b) PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

AS OF SEPTEMBER 30,	2025	2024
Assets		
Investments, at fair value	\$ 12,832,497	\$ 10,618,617
Receivables:		
Organization contributions	3,756	4,009
Participants' contributions	617	2,655
Notes receivable from participants	94,245	38,310
Total assets	12,931,115	10,663,591
Liabilities	-	-
Net assets available for benefits	\$ 12,931,115	\$ 10,663,591

See notes to financial statements.

THE UNITY COUNCIL 403(b) PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

FOR THE YEAR ENDED SEPTEMBER 30,

2025

Additions

Investment income:

Net appreciation of investments	\$	1,371,945
Interest income on investments		593
Dividend income on investments		93,092
Net investment income		1,465,630

Interest income on notes receivable from participants		6,241
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Contributions:

Organization contributions		458,256
Participants' contributions		809,552
Participants' rollover contributions		166,692
Total contributions		1,434,500

Total additions		2,906,371
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Deductions

Benefits paid to participants		627,507
Administrative expenses		11,340
Total deductions		638,847

Net increase		2,267,524
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Net assets available for benefits

Beginning of year		10,663,591
End of year	\$	12,931,115

See notes to financial statements.

THE UNITY COUNCIL 403(b) PLAN

NOTES TO FINANCIAL STATEMENTS

SEPTEMBER 30, 2025

1. PLAN DESCRIPTION

The following description of The Unity Council 403(b) Plan (the "Plan") provides only general information. Participants and other interested parties should refer to the Plan document for a more complete description of the Plan's provisions.

General - The Plan is a defined contribution plan covering eligible employees who have been employed by Spanish Speaking Unity Council of Alameda County, Inc. dba The Unity Council (the "Plan Sponsor") and a participating employer (collectively, the "Organization"). All permissible employees of the Organization are eligible to enroll on their date of hire except employees who typically work less than 20 hours a week or were acquired as part of an IRC Section 410(b)(6)(C) transaction. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended.

Contributions - Each year, participants may contribute from one percent to 100 percent of pretax annual compensation, as defined and subject to certain limitations under the Internal Revenue Code ("IRC"). Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other eligible retirement plans, as defined. Participants direct the investment of their contributions into various investment options offered by the Plan.

The Plan provides for Organization matching contributions at the rate of 100 percent of participant's deferral up to five percent of annual eligible compensation. The Organization matching contribution was \$458,256, net of forfeitures, for the year ended September 30, 2025.

Participant Accounts - Each participant's account is credited with the participant's contributions and Organization matching contributions, as well as allocations of Plan earnings, and charged with any withdrawals or distributions requested by the participant, investment losses and allocation of administrative expenses, if applicable. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting - Participants are vested immediately in their contributions plus actual earnings thereon. Vesting in the Organization's contribution portion of their accounts is based on years of service. Participants are vested in Organization contributions over a six-year period, as defined.

Forfeitures - Forfeitures of Organization contributions may be used to pay Plan administrative expenses or to reduce future Organization contributions and total \$20,269 and \$13,518 as of September 30, 2025 and 2024, respectively. During the year ended September 30, 2025, forfeitures of \$67,852 were utilized to reduce Organization contributions.

Payment of Benefits - On termination of service for any reason, a participant or their beneficiaries, as applicable, may elect to receive a lump-sum amount equal to the value of the participant's vested interest in their account as permitted under the Plan. The Plan provides for a mandatory cash-out following severance of employment for account balances less than \$5,000 and effective October 1, 2024, this amount was increased to \$7,000.

THE UNITY COUNCIL 403(b) PLAN

NOTES TO FINANCIAL STATEMENTS

SEPTEMBER 30, 2025

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting - The accompanying financial statements have been prepared on the accrual basis of accounting, in accordance with accounting principles generally accepted in the United States of America.

Estimates - The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the plan administrator to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Reclassifications - Certain reclassifications have been made to the 2024 financial statements to conform to the 2025 presentation.

Contributions - Contributions from Plan participants and the matching contributions from the Organization are recorded in the year in which the participant contributions are withheld from compensation.

Investment Valuation and Income Recognition - The Plan's investments are reported at fair value (except for fully benefit-responsive investment contracts, which are reported at contract value). Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date.

Investments are valued daily. Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on an accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Notes Receivable from Participants - Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred.

Administrative Expenses - Certain administrative expenses incidental to the administration of the Plan may be paid by the Plan, unless otherwise paid by the Organization. Administrative expenses paid by the Organization are excluded from these financial statements.

Most investment options have fees which reduce the overall return on assets. The net appreciation of investments is reflected net of these fees.

Benefits Payable to Participants - Benefits are recorded when paid.

Subsequent Events - The Organization has evaluated subsequent events through May 20, 2026, which is the date that the financial statements were available to be issued, and determined that there were no subsequent events or transactions that required recognition or disclosure in the financial statements, except as disclosed below.

Effective October 1, 2025, the Plan was amended to allow participants to make Roth after-tax contributions.

THE UNITY COUNCIL 403(b) PLAN

NOTES TO FINANCIAL STATEMENTS

SEPTEMBER 30, 2025

3. FAIR VALUE

The Plan accounts for its financial instruments using a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3).

The three levels of the fair value hierarchy are the following:

- Level 1 – Inputs to the valuation methodology that are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.
- Level 2 – Inputs other than Level 1 that are observable, either directly or indirectly, such as quoted prices for similar assets or liabilities in active markets; quoted prices for identical or similar assets or liabilities in markets that are inactive; or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities.
- Level 3 – Inputs to the valuation that are unobservable and significant to the fair value measurement.

A financial instrument's categorization within the valuation hierarchy is based upon the lowest level of input that is significant to the fair value measurement.

The following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at September 30, 2025 and 2024.

Mutual Funds – This category consists of publicly traded funds of registered investment companies. The net asset value of the mutual fund's shares is quoted on the exchange where the fund is traded and therefore classified as Level 1 within the valuation hierarchy.

Best of America Fixed Account – This is a nonbenefit-responsive annuity contract. The Best of America Fixed Account is reported by Nationwide Life Insurance Company at contract value which approximates fair value. The fair value of the Best of America Fixed Account represents the book value less any contingent deferred sales charge. As the investment is contract-based, observable prices for identical or similar investments do not exist. The Best of America Fixed Account is classified as Level 3 in the fair value hierarchy.

The crediting interest rate resets annually and were 1.80 percent and 2.19 percent as of September 30, 2025 and 2024, respectively. Withdrawals are available in the form of a lump sum distribution with a market value adjustment or an installment payout over a period of years. There are certain restrictions relating to participant-directed exchanges.

There is no guarantee, however, that Nationwide Life Insurance Company, will always be financially able to fulfill its guarantees related to this investment.

THE UNITY COUNCIL 403(b) PLAN

NOTES TO FINANCIAL STATEMENTS

SEPTEMBER 30, 2025

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following tables set forth by level, within the fair value hierarchy, the Plan's investments at fair value:

Investments at Fair Value as of September 30, 2025

	Level 1	Level 2	Level 3	Total
Mutual funds	\$ 12,696,828	\$ -	\$ -	\$ 12,696,828
Best of America Fixed Account	-	-	135,669	135,669
Total investments at fair value	\$ 12,696,828	\$ -	\$ 135,669	\$ 12,832,497

Investments at Fair Value as of September 30, 2024

	Level 1	Level 2	Level 3	Total
Mutual funds	\$ 10,507,809	\$ -	\$ -	\$ 10,507,809
Best of America Fixed Account	-	-	110,808	110,808
Total investments at fair value	\$ 10,507,809	\$ -	\$ 110,808	\$ 10,618,617

4. FINANCIAL DATA CERTIFIED BY THE CUSTODIANS

The plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, as permitted under such election, the following information was obtained by management and agreed to or derived from information certified as complete and accurate by Nationwide Trust Company, FSB ("Nationwide") and Fidelity Management Trust Company (collectively, "the Custodians"), and was not subjected to any auditing procedures performed by the independent public accountants:

- a. Investments, at fair value as shown in the accompanying statements of net assets available for benefits as of September 30, 2025 and 2024.
- b. Net investment income as shown in the accompanying statement of changes in net assets available for benefits for the year ended September 30, 2025.
- c. Investments as listed in the accompanying Schedule H, Line 4i - Schedule of Assets (Held at End of Year) as of September 30, 2025.

5. NOTES RECEIVABLE FROM PARTICIPANTS

Participants may borrow from their fund accounts up to a maximum equal to the lesser of \$50,000 less the highest outstanding loan balance during the prior 12 months or 50 percent of their vested account balance. Loans are generally issued with a maturity of up to five years. The term of any loan for the purpose of purchasing a primary residence shall not exceed 10 years.

THE UNITY COUNCIL 403(b) PLAN

NOTES TO FINANCIAL STATEMENTS

SEPTEMBER 30, 2025

The loan interest rate is set at one percent above the prime rate, as defined. Principal and interest are paid ratably through payroll deductions.

6. RISKS AND UNCERTAINTIES

The Plan invests in various investment securities. Investment securities are exposed to various risks, such as interest rate, market and credit risks. Market risks include global events which could impact the value of investment securities, such as a pandemic or international conflict. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

7. PLAN TERMINATION

The Organization has the right under the Plan to discontinue its contributions at any time and to terminate the Plan, subject to the provisions of ERISA. In the event of Plan termination, participants would become 100 percent vested in their Organization contributions.

8. TAX STATUS

The Plan is a volume submitter 403(b) plan which is the subject of a favorable tax opinion letter from the IRS dated July 24, 2019. The plan administrator believes the Plan has been operated in accordance with the applicable provisions of the IRC and, accordingly, believes that the Plan is exempt from income taxes.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Organization has taken a significant uncertain position that more likely than not would not be sustained upon examination by the IRS. The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of September 30, 2025, there are no uncertain positions taken or expected to be taken. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

9. RELATED PARTY AND PARTY IN INTEREST TRANSACTIONS

Plan investments are managed by the Custodians. Transactions with the Custodians qualify as party in interest transactions for which exemptions exist.

10. DELINQUENT PARTICIPANT CONTRIBUTIONS

Certain 2023, 2024, and 2025 contributions were not remitted timely to Nationwide as required by the Department of Labor's regulations. These late remittances are detailed in the attached Schedule H, Line 4a - Schedule of Delinquent Participant Contributions.

THE UNITY COUNCIL 403(b) PLAN**EIN 94-1670490 PLAN #001****SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)****SEPTEMBER 30, 2025**

Identity of issue	Description of investment	Current value
Investments		
* Fidelity Fund	Mutual Fund	\$ 8,523
* Fidelity Puritan Fund	Mutual Fund	89
* Fidelity Select Tech Hardware Fund	Mutual Fund	1,425
* Fidelity Magellan Fund	Mutual Fund	106,409
* Fidelity Equity Income Fund	Mutual Fund	35,409
* Fidelity Growth Company Fund	Mutual Fund	27,963
* Fidelity Growth & Income Fund	Mutual Fund	258,792
* Fidelity Intermediate Bond Fund	Mutual Fund	32
* Fidelity Capital & Income Fund	Mutual Fund	71
* Fidelity Select Biotechnology Fund	Mutual Fund	13,348
* Fidelity Select Health Care Fund	Mutual Fund	1,660
* Fidelity Blue Chip Growth Fund	Mutual Fund	106,203
* Fidelity Asset Manager 50% Fund	Mutual Fund	191
* Fidelity Disciplined Equity Fund	Mutual Fund	9,921
* Fidelity Worldwide Fund	Mutual Fund	41,441
* Fidelity Equity Dividend Income Fund	Mutual Fund	176,560
* Fidelity Asset Manager 70% Fund	Mutual Fund	2,978
* Fidelity Emerging Markets Fund	Mutual Fund	171
* Fidelity Diversified International Fund	Mutual Fund	1,203
* Fidelity Asset Manager 20% Fund	Mutual Fund	2,659
* Fidelity Short-Term Bond Fund	Mutual Fund	5,670
* Fidelity Government Money Market Fund	Mutual Fund	29,120
* Fidelity International Small Cap Fund	Mutual Fund	612
* Fidelity Total Bond Fund	Mutual Fund	18,171
* Fidelity Asset Manager 60% Fund	Mutual Fund	206
* Fidelity U.S. Bond Index Fund	Mutual Fund	28,504
* Fidelity 500 Index Fund	Mutual Fund	2,618
* Fidelity Stock Selector Mid Cap Fund	Mutual Fund	5,893
* Fidelity Freedom Income Fund	Mutual Fund	35,216
* Fidelity Freedom 2010 Fund	Mutual Fund	36
* Fidelity Freedom 2015 Fund	Mutual Fund	13,255
* Fidelity Freedom 2020 Fund	Mutual Fund	3,615
* Fidelity Freedom 2025 Fund	Mutual Fund	41,876
* Fidelity Freedom 2030 Fund	Mutual Fund	352,106
* Fidelity Freedom 2035 Fund	Mutual Fund	93,171
* Fidelity Freedom 2040 Fund	Mutual Fund	25,057
* Fidelity Freedom 2045 Fund	Mutual Fund	88,607

*Continued on next page**See notes to financial statements and accompanying independent auditor's report.*

THE UNITY COUNCIL 403(b) PLAN**EIN 94-1670490 PLAN #001****SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)****SEPTEMBER 30, 2025****(CONTINUED)**

Identity of issue	Description of investment	Current value
* Fidelity Freedom 2050 Fund	Mutual Fund	158,167
* Fidelity Freedom 2055 Fund	Mutual Fund	28,008
American Funds Capital World Growth & Income Fund	Mutual Fund	58,818
American Funds EUPAC Fund	Mutual Fund	25,315
American Funds Fundamental Investors Fund	Mutual Fund	203,800
American Funds New Perspective Fund	Mutual Fund	179,662
American Funds New World Fund	Mutual Fund	39,723
American Funds U.S. Government Securities Fund	Mutual Fund	275
Blackrock High Yield Fund	Mutual Fund	18,664
BlackRock Strategic Income Opportunities Fund	Mutual Fund	1,136
Cohen & Steers Real Estate Securities Fund	Mutual Fund	7,478
Columbia Select Large Cap Growth Fund	Mutual Fund	3
DFA Emerging Markets Core Equity Fund	Mutual Fund	3,155
DFA Global Real Estate Securities Fund	Mutual Fund	2
DFA Inflation-Protected Securities Fund	Mutual Fund	41,811
DFA International Value Fund	Mutual Fund	145,124
DFA U.S. Large Cap Value Fund	Mutual Fund	4,536
DFA U.S. Small Cap Fund	Mutual Fund	54,968
DFA U.S. Targeted Value Fund	Mutual Fund	1,859
Federated Hermes Government Obligations Premier Fund	Mutual Fund	118,623
* Fidelity 500 Index Fund	Mutual Fund	78,310
* Fidelity Global ex U.S. Index Fund	Mutual Fund	45,555
* Fidelity Inflation-Protected Bond Index Fund	Mutual Fund	4,424
* Fidelity International Index Fund	Mutual Fund	4
* Fidelity Large Cap Growth Index Fund	Mutual Fund	49,536
* Fidelity Large Cap Value Index Fund	Mutual Fund	66,127
* Fidelity Mid Cap Index Fund	Mutual Fund	125,688
Franklin Small Cap Growth Fund	Mutual Fund	15,899
Templeton Global Bond Fund	Mutual Fund	37,582
Goldman Sachs GQP Partners International Opportunities Fund	Mutual Fund	44,878
Janus Henderson Global Life Sciences Fund	Mutual Fund	563
JPMorgan Equity Income Fund	Mutual Fund	2,696
JPMorgan Value Advantage Fund	Mutual Fund	161,955

*Continued on next page**See notes to financial statements and accompanying independent auditor's report.*

THE UNITY COUNCIL 403(b) PLAN**EIN 94-1670490 PLAN #001****SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)****SEPTEMBER 30, 2025****(CONTINUED)**

Identity of issue	Description of investment	Current value
Western Asset Core Bond Fund	Mutual Fund	58,706
Lord Abbett Floating Rate Fund	Mutual Fund	798
NYLI MacKay High Yield Corporate Bond Fund	Mutual Fund	1,021
* Nationwide Invesco Core Plus Bond Fund	Mutual Fund	63,195
* Nationwide Loomis All Cap Growth Fund	Mutual Fund	74,411
* Nationwide Loomis Core Bond Fund	Mutual Fund	51,195
* Nationwide BNY Mellon Dynamic U.S. Equity Income Fund	Mutual Fund	46,770
* Nationwide BNY Mellon Dynamic U.S. Core Fund	Mutual Fund	48,152
PGIM Total Return Bond Fund	Mutual Fund	2,494
PIMCO Income Fund	Mutual Fund	73,795
PIMCO Real Return Fund	Mutual Fund	32,814
Principal Real Estate Securities Fund	Mutual Fund	754
T.Rowe Price Blue Chip Growth Fund	Mutual Fund	127,653
T.Rowe Price Science and Technology Fund	Mutual Fund	17,875
Vanguard Explorer Fund	Mutual Fund	1,651
Vanguard FTSE Social Index Fund	Mutual Fund	63,172
Vanguard Growth Index Fund	Mutual Fund	99,284
Vanguard International Growth Fund	Mutual Fund	46,291
Vanguard Intermediate-Term Bond Fund	Mutual Fund	9,758
Vanguard Mid-Cap Growth Index Fund	Mutual Fund	29,982
Vanguard Mid-Cap Value Index Fund	Mutual Fund	5,263
Vanguard Small-Cap Growth Index Fund	Mutual Fund	10,014
Vanguard Small-Cap Value Index Fund	Mutual Fund	19,084
Vanguard Target Retirement 2020 Fund	Mutual Fund	268,451
Vanguard Target Retirement 2025 Fund	Mutual Fund	935,708
Vanguard Target Retirement 2030 Fund	Mutual Fund	1,300,206
Vanguard Target Retirement 2035 Fund	Mutual Fund	1,332,814
Vanguard Target Retirement 2040 Fund	Mutual Fund	760,296
Vanguard Target Retirement 2045 Fund	Mutual Fund	1,038,975
Vanguard Target Retirement 2050 Fund	Mutual Fund	858,032
Vanguard Target Retirement 2055 Fund	Mutual Fund	821,253
Vanguard Target Retirement 2060 Fund	Mutual Fund	575,708
Vanguard Target Retirement 2065 Fund	Mutual Fund	176,479
Vanguard Target Retirement Income Fund	Mutual Fund	65,580
Vanguard Total International Stock Index Fund	Mutual Fund	2,725
Vanguard Total Stock Market Index Fund	Mutual Fund	6,717
Vanguard Value Index Fund	Mutual Fund	58,723

*Continued on next page**See notes to financial statements and accompanying independent auditor's report.*

THE UNITY COUNCIL 403(b) PLAN

EIN 94-1670490 PLAN #001

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)**SEPTEMBER 30, 2025****(CONTINUED)**

Identity of issue	Description of investment	Current value
American Beacon International Equity Fund	Mutual Fund	3,791
AB Global Bond Fund	Mutual Fund	11,593
Avantis Emerging Markets Equity Fund	Mutual Fund	11,132
Avantis U.S. Small Cap Value Fund	Mutual Fund	15,870
* Nationwide GQG U.S. Quality Equity Fund	Mutual Fund	68,184
* Fidelity Total International Index Fund	Mutual Fund	19,661
* Nationwide Geneva Mid Cap Growth Fund	Mutual Fund	23,041
Columbia Overseas Value Fund	Mutual Fund	25,106
Prudential Short-Term Corporate Bond Fund	Mutual Fund	111,759
AB High Income Fund	Mutual Fund	2,858
Columbia Commodity Strategy Fund	Mutual Fund	24,467
Invesco Global Real Estate Income Fund	Mutual Fund	30,442
		12,696,828
Nonbenefit-responsive investment contract		
* Best of America Fixed Account	Guaranteed Interest Contract	135,669
* Participant loans	Interest rates from 4.25% to 9.50%, maturity dates from 2025 to 2030	94,245
		\$ 12,926,742

* Indicates a party in interest to the Plan.

See notes to financial statements and accompanying independent auditor's report.

THE UNITY COUNCIL 403(b) PLAN

EIN 94-1670490 PLAN #001

SCHEDULE H, LINE 4a - SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS FOR THE YEAR ENDED SEPTEMBER 30, 2025

Participant Contributions Transferred Late to Plan	Check here if Late Participant Loan Repayments are included	Total that Constitutes Nonexempt Prohibited Transactions:			Total Fully Corrected Under VFCP and PTE 2002-51
		Contributions Not Corrected	Contributions Corrected Outside VFCP*	Contributions Pending Correction in VFCP*	
\$ 562,557 **	✓	\$ -	\$ 562,557	\$ -	-
102,296 ***	✓	-	102,296	-	-
34,498 ^	✓	-	34,498	-	-
1,257 ^^	✓	1,257	-	-	-
\$ 700,608		\$ 1,257	\$ 699,351	\$ -	-

* Voluntary Fiduciary Correction Program

** 2023 contributions deposited on various dates in 2024 and 2025. Earnings deposited to the Plan in January 2025.

*** 2024 contributions deposited on various dates in 2024. Earnings deposited to the Plan in September 2025.

^ 2025 contributions deposited on various dates in 2025. Earnings deposited to the Plan in April and September 2025.

^^ 2025 contributions deposited on various dates in 2025. Earnings have not been deposited to the Plan as of the report date.

See notes to financial statements and accompanying independent auditor's report.

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2024 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2024 or fiscal plan year beginning 10/01/2024 and ending 09/30/2025	

A	This return/report is for:	☐ a multiemployer plan	☐ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)
		☒ a single-employer plan	☐ a DFE (specify) _____
B	This return/report is:	☐ the first return/report	☐ the final return/report
		☐ an amended return/report	☐ a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here. ▶ ☐		
D	Check box if filing under:	☐ Form 5558	☐ automatic extension
		☐ special extension (enter description)	☐ the DFVC program
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶ ☐		

Part II	Basic Plan Information—enter all requested information		
1a	Name of plan THE UNITY COUNCIL 403(B) PLAN	1b	Three-digit plan number (PN) ▶ 001
		1c	Effective date of plan 10/17/1995
2a	Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) SPANISH SPEAKING UNITY COUNCIL OF ALAMEDA COUNTY 1900 FRUITVALE AVENUE, SUITE 2A OAKLAND CA 94601	2b	Employer Identification Number (EIN) 94-1670490
		2c	Plan Sponsor's telephone number 510-535-6900
		2d	Business code (see instructions) 611000

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE		5/29/2026	TERESA ESTRADA
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE		5/29/2026	TERESA ESTRADA
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 590
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	6a(1) 357 6a(2) 325 6b 90 6c 151 6d 566 6e 0 6f 566 6g(1) 406 6g(2) 415 6h 18
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2F 2G 2M 2T 3D 3H	

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

9a Plan funding arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
--	---

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

- (1) ☒ **R** (Retirement Plan Information)
- (2) ☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- (3) ☐ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary
- (4) ☐ **DCG** (Individual Plan Information) – Number Attached _____
- (5) ☐ **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- (1) ☒ **H** (Financial Information)
- (2) ☐ **I** (Financial Information – Small Plan)
- (3) ☒ **A** (Insurance Information) – Number Attached 1
- (4) ☒ **C** (Service Provider Information)
- (5) ☐ **D** (DFE/Participating Plan Information)
- (6) ☐ **G** (Financial Transaction Schedules)

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2024 Form M-1 annual report. If the plan was not required to file the 2024 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

THE UNITY COUNCIL 403(b) PLAN
FINANCIAL STATEMENTS,
SUPPLEMENTAL SCHEDULES,
AND
INDEPENDENT AUDITOR'S REPORT
SEPTEMBER 30, 2025



THE UNITY COUNCIL 403(b) PLAN
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INDEPENDENT AUDITOR'S REPORT

To the Plan Committee of
The Unity Council 403(b) Plan:

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit

We have performed audits of the financial statements of The Unity Council 403(b) Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), as permitted by ERISA Section 103(a)(3)(C) ("ERISA Section 103(a)(3)(C) audit"). The financial statements comprise the statements of net assets available for benefits as of September 30, 2025 and 2024, and the related statement of changes in net assets available for benefits for the year ended September 30, 2025, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the Plan ("investment information") by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency ("qualified institution"), provided that the investment information regarding assets so held is prepared and certified to by the qualified institution in accordance with 29 CFR 2520.103-5 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

Management has obtained certifications from qualified institutions as of September 30, 2025 and 2024, and for the year ended September 30, 2025, stating that the certified investment information, as described in Note 4 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and on the procedures performed as described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report

- the amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America ("GAAP").
- the information in the accompanying financial statements related to assets held by and certified to by qualified institutions agrees to, or is derived from, in all material respects, the information prepared and certified by institutions that management determined meet the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America ("GAAS"). Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are required to be independent of the Plan and to meet our ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with GAAP, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern within one year after the date the financial statements are issued or available to be issued.

Management is also responsible for maintaining a current Plan instrument, including all Plan amendments, administering the Plan, and determining that the Plan's transactions that are presented and disclosed in the financial statements are in conformity with the Plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditor's Responsibilities for the Audit of the Financial Statements

Except as described in the *Scope and Nature of the ERISA Section 103(a)(3)(C) Audit* section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

Our audits did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information and to assess whether they are in accordance with the presentation and disclosure requirements of GAAP.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with GAAP.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that were identified during the audit.

Other Matter – Supplemental Schedules Required by ERISA

The supplemental schedules of Schedule H, Line 4i - Schedule of Assets (Held at End of Year) as of September 30, 2025 and the Schedule H, Line 4a - Schedule of Delinquent Participant Contributions for the year ended September 30, 2025 are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, including their form and content, are presented in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion

- the form and content of the supplemental schedules, other than the information in the supplemental schedules that agreed to or is derived from the certified investment information, are presented, in all material respects, in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.
- the information in the supplemental schedules related to assets held by and certified to by qualified institutions agrees to, or is derived from, in all material respects, the information prepared and certified by institutions that management determined meet the requirements of ERISA Section 103(a)(3)(C).



Long Beach, California
May 20, 2026

THE UNITY COUNCIL 403(b) PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

AS OF SEPTEMBER 30,	2025	2024
Assets		
Investments, at fair value	\$ 12,832,497	\$ 10,618,617
Receivables:		
Organization contributions	3,756	4,009
Participants' contributions	617	2,655
Notes receivable from participants	94,245	38,310
Total assets	12,931,115	10,663,591
Liabilities	-	-
Net assets available for benefits	\$ 12,931,115	\$ 10,663,591

See notes to financial statements.

THE UNITY COUNCIL 403(b) PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

FOR THE YEAR ENDED SEPTEMBER 30,

2025

Additions

Investment income:

Net appreciation of investments	\$ 1,371,945
Interest income on investments	593
Dividend income on investments	93,092
Net investment income	1,465,630

Interest income on notes receivable from participants	6,241
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Contributions:

Organization contributions	458,256
Participants' contributions	809,552
Participants' rollover contributions	166,692
Total contributions	1,434,500

Total additions	2,906,371
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Deductions

Benefits paid to participants	627,507
Administrative expenses	11,340

Total deductions	638,847
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Net increase	2,267,524
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Net assets available for benefits

Beginning of year	10,663,591
End of year	\$ 12,931,115

See notes to financial statements.

THE UNITY COUNCIL 403(b) PLAN

NOTES TO FINANCIAL STATEMENTS

SEPTEMBER 30, 2025

1. PLAN DESCRIPTION

The following description of The Unity Council 403(b) Plan (the "Plan") provides only general information. Participants and other interested parties should refer to the Plan document for a more complete description of the Plan's provisions.

General - The Plan is a defined contribution plan covering eligible employees who have been employed by Spanish Speaking Unity Council of Alameda County, Inc. dba The Unity Council (the "Plan Sponsor") and a participating employer (collectively, the "Organization"). All permissible employees of the Organization are eligible to enroll on their date of hire except employees who typically work less than 20 hours a week or were acquired as part of an IRC Section 410(b)(6)(C) transaction. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended.

Contributions - Each year, participants may contribute from one percent to 100 percent of pretax annual compensation, as defined and subject to certain limitations under the Internal Revenue Code ("IRC"). Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other eligible retirement plans, as defined. Participants direct the investment of their contributions into various investment options offered by the Plan.

The Plan provides for Organization matching contributions at the rate of 100 percent of participant's deferral up to five percent of annual eligible compensation. The Organization matching contribution was \$458,256, net of forfeitures, for the year ended September 30, 2025.

Participant Accounts - Each participant's account is credited with the participant's contributions and Organization matching contributions, as well as allocations of Plan earnings, and charged with any withdrawals or distributions requested by the participant, investment losses and allocation of administrative expenses, if applicable. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting - Participants are vested immediately in their contributions plus actual earnings thereon. Vesting in the Organization's contribution portion of their accounts is based on years of service. Participants are vested in Organization contributions over a six-year period, as defined.

Forfeitures - Forfeitures of Organization contributions may be used to pay Plan administrative expenses or to reduce future Organization contributions and total \$20,269 and \$13,518 as of September 30, 2025 and 2024, respectively. During the year ended September 30, 2025, forfeitures of \$67,852 were utilized to reduce Organization contributions.

Payment of Benefits - On termination of service for any reason, a participant or their beneficiaries, as applicable, may elect to receive a lump-sum amount equal to the value of the participant's vested interest in their account as permitted under the Plan. The Plan provides for a mandatory cash-out following severance of employment for account balances less than \$5,000 and effective October 1, 2024, this amount was increased to \$7,000.

THE UNITY COUNCIL 403(b) PLAN

NOTES TO FINANCIAL STATEMENTS

SEPTEMBER 30, 2025

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting - The accompanying financial statements have been prepared on the accrual basis of accounting, in accordance with accounting principles generally accepted in the United States of America.

Estimates - The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the plan administrator to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Reclassifications - Certain reclassifications have been made to the 2024 financial statements to conform to the 2025 presentation.

Contributions - Contributions from Plan participants and the matching contributions from the Organization are recorded in the year in which the participant contributions are withheld from compensation.

Investment Valuation and Income Recognition - The Plan's investments are reported at fair value (except for fully benefit-responsive investment contracts, which are reported at contract value). Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date.

Investments are valued daily. Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on an accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Notes Receivable from Participants - Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred.

Administrative Expenses - Certain administrative expenses incidental to the administration of the Plan may be paid by the Plan, unless otherwise paid by the Organization. Administrative expenses paid by the Organization are excluded from these financial statements.

Most investment options have fees which reduce the overall return on assets. The net appreciation of investments is reflected net of these fees.

Benefits Payable to Participants - Benefits are recorded when paid.

Subsequent Events - The Organization has evaluated subsequent events through May 20, 2026, which is the date that the financial statements were available to be issued, and determined that there were no subsequent events or transactions that required recognition or disclosure in the financial statements, except as disclosed below.

Effective October 1, 2025, the Plan was amended to allow participants to make Roth after-tax contributions.

THE UNITY COUNCIL 403(b) PLAN

NOTES TO FINANCIAL STATEMENTS

SEPTEMBER 30, 2025

3. FAIR VALUE

The Plan accounts for its financial instruments using a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3).

The three levels of the fair value hierarchy are the following:

- Level 1 – Inputs to the valuation methodology that are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.
- Level 2 – Inputs other than Level 1 that are observable, either directly or indirectly, such as quoted prices for similar assets or liabilities in active markets; quoted prices for identical or similar assets or liabilities in markets that are inactive; or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities.
- Level 3 – Inputs to the valuation that are unobservable and significant to the fair value measurement.

A financial instrument's categorization within the valuation hierarchy is based upon the lowest level of input that is significant to the fair value measurement.

The following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at September 30, 2025 and 2024.

Mutual Funds – This category consists of publicly traded funds of registered investment companies. The net asset value of the mutual fund's shares is quoted on the exchange where the fund is traded and therefore classified as Level 1 within the valuation hierarchy.

Best of America Fixed Account – This is a nonbenefit-responsive annuity contract. The Best of America Fixed Account is reported by Nationwide Life Insurance Company at contract value which approximates fair value. The fair value of the Best of America Fixed Account represents the book value less any contingent deferred sales charge. As the investment is contract-based, observable prices for identical or similar investments do not exist. The Best of America Fixed Account is classified as Level 3 in the fair value hierarchy.

The crediting interest rate resets annually and were 1.80 percent and 2.19 percent as of September 30, 2025 and 2024, respectively. Withdrawals are available in the form of a lump sum distribution with a market value adjustment or an installment payout over a period of years. There are certain restrictions relating to participant-directed exchanges.

There is no guarantee, however, that Nationwide Life Insurance Company, will always be financially able to fulfill its guarantees related to this investment.

THE UNITY COUNCIL 403(b) PLAN

NOTES TO FINANCIAL STATEMENTS

SEPTEMBER 30, 2025

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following tables set forth by level, within the fair value hierarchy, the Plan's investments at fair value:

Investments at Fair Value as of September 30, 2025

	Level 1	Level 2	Level 3	Total
Mutual funds	\$ 12,696,828	\$ -	\$ -	\$ 12,696,828
Best of America Fixed Account	-	-	135,669	135,669
Total investments at fair value	\$ 12,696,828	\$ -	\$ 135,669	\$ 12,832,497

Investments at Fair Value as of September 30, 2024

	Level 1	Level 2	Level 3	Total
Mutual funds	\$ 10,507,809	\$ -	\$ -	\$ 10,507,809
Best of America Fixed Account	-	-	110,808	110,808
Total investments at fair value	\$ 10,507,809	\$ -	\$ 110,808	\$ 10,618,617

4. FINANCIAL DATA CERTIFIED BY THE CUSTODIANS

The plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, as permitted under such election, the following information was obtained by management and agreed to or derived from information certified as complete and accurate by Nationwide Trust Company, FSB ("Nationwide") and Fidelity Management Trust Company (collectively, "the Custodians"), and was not subjected to any auditing procedures performed by the independent public accountants:

- a. Investments, at fair value as shown in the accompanying statements of net assets available for benefits as of September 30, 2025 and 2024.
- b. Net investment income as shown in the accompanying statement of changes in net assets available for benefits for the year ended September 30, 2025.
- c. Investments as listed in the accompanying Schedule H, Line 4i - Schedule of Assets (Held at End of Year) as of September 30, 2025.

5. NOTES RECEIVABLE FROM PARTICIPANTS

Participants may borrow from their fund accounts up to a maximum equal to the lesser of \$50,000 less the highest outstanding loan balance during the prior 12 months or 50 percent of their vested account balance. Loans are generally issued with a maturity of up to five years. The term of any loan for the purpose of purchasing a primary residence shall not exceed 10 years.

THE UNITY COUNCIL 403(b) PLAN

NOTES TO FINANCIAL STATEMENTS

SEPTEMBER 30, 2025

The loan interest rate is set at one percent above the prime rate, as defined. Principal and interest are paid ratably through payroll deductions.

6. RISKS AND UNCERTAINTIES

The Plan invests in various investment securities. Investment securities are exposed to various risks, such as interest rate, market and credit risks. Market risks include global events which could impact the value of investment securities, such as a pandemic or international conflict. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

7. PLAN TERMINATION

The Organization has the right under the Plan to discontinue its contributions at any time and to terminate the Plan, subject to the provisions of ERISA. In the event of Plan termination, participants would become 100 percent vested in their Organization contributions.

8. TAX STATUS

The Plan is a volume submitter 403(b) plan which is the subject of a favorable tax opinion letter from the IRS dated July 24, 2019. The plan administrator believes the Plan has been operated in accordance with the applicable provisions of the IRC and, accordingly, believes that the Plan is exempt from income taxes.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Organization has taken a significant uncertain position that more likely than not would not be sustained upon examination by the IRS. The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of September 30, 2025, there are no uncertain positions taken or expected to be taken. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

9. RELATED PARTY AND PARTY IN INTEREST TRANSACTIONS

Plan investments are managed by the Custodians. Transactions with the Custodians qualify as party in interest transactions for which exemptions exist.

10. DELINQUENT PARTICIPANT CONTRIBUTIONS

Certain 2023, 2024, and 2025 contributions were not remitted timely to Nationwide as required by the Department of Labor's regulations. These late remittances are detailed in the attached Schedule H, Line 4a - Schedule of Delinquent Participant Contributions.

THE UNITY COUNCIL 403(b) PLAN**EIN 94-1670490 PLAN #001****SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)****SEPTEMBER 30, 2025**

Identity of issue	Description of investment	Current value
Investments		
* Fidelity Fund	Mutual Fund	\$ 8,523
* Fidelity Puritan Fund	Mutual Fund	89
* Fidelity Select Tech Hardware Fund	Mutual Fund	1,425
* Fidelity Magellan Fund	Mutual Fund	106,409
* Fidelity Equity Income Fund	Mutual Fund	35,409
* Fidelity Growth Company Fund	Mutual Fund	27,963
* Fidelity Growth & Income Fund	Mutual Fund	258,792
* Fidelity Intermediate Bond Fund	Mutual Fund	32
* Fidelity Capital & Income Fund	Mutual Fund	71
* Fidelity Select Biotechnology Fund	Mutual Fund	13,348
* Fidelity Select Health Care Fund	Mutual Fund	1,660
* Fidelity Blue Chip Growth Fund	Mutual Fund	106,203
* Fidelity Asset Manager 50% Fund	Mutual Fund	191
* Fidelity Disciplined Equity Fund	Mutual Fund	9,921
* Fidelity Worldwide Fund	Mutual Fund	41,441
* Fidelity Equity Dividend Income Fund	Mutual Fund	176,560
* Fidelity Asset Manager 70% Fund	Mutual Fund	2,978
* Fidelity Emerging Markets Fund	Mutual Fund	171
* Fidelity Diversified International Fund	Mutual Fund	1,203
* Fidelity Asset Manager 20% Fund	Mutual Fund	2,659
* Fidelity Short-Term Bond Fund	Mutual Fund	5,670
* Fidelity Government Money Market Fund	Mutual Fund	29,120
* Fidelity International Small Cap Fund	Mutual Fund	612
* Fidelity Total Bond Fund	Mutual Fund	18,171
* Fidelity Asset Manager 60% Fund	Mutual Fund	206
* Fidelity U.S. Bond Index Fund	Mutual Fund	28,504
* Fidelity 500 Index Fund	Mutual Fund	2,618
* Fidelity Stock Selector Mid Cap Fund	Mutual Fund	5,893
* Fidelity Freedom Income Fund	Mutual Fund	35,216
* Fidelity Freedom 2010 Fund	Mutual Fund	36
* Fidelity Freedom 2015 Fund	Mutual Fund	13,255
* Fidelity Freedom 2020 Fund	Mutual Fund	3,615
* Fidelity Freedom 2025 Fund	Mutual Fund	41,876
* Fidelity Freedom 2030 Fund	Mutual Fund	352,106
* Fidelity Freedom 2035 Fund	Mutual Fund	93,171
* Fidelity Freedom 2040 Fund	Mutual Fund	25,057
* Fidelity Freedom 2045 Fund	Mutual Fund	88,607

*Continued on next page**See notes to financial statements and accompanying independent auditor's report.*

THE UNITY COUNCIL 403(b) PLAN**EIN 94-1670490 PLAN #001****SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)****SEPTEMBER 30, 2025****(CONTINUED)**

Identity of issue	Description of investment	Current value
* Fidelity Freedom 2050 Fund	Mutual Fund	158,167
* Fidelity Freedom 2055 Fund	Mutual Fund	28,008
American Funds Capital World Growth & Income Fund	Mutual Fund	58,818
American Funds EUPAC Fund	Mutual Fund	25,315
American Funds Fundamental Investors Fund	Mutual Fund	203,800
American Funds New Perspective Fund	Mutual Fund	179,662
American Funds New World Fund	Mutual Fund	39,723
American Funds U.S. Government Securities Fund	Mutual Fund	275
Blackrock High Yield Fund	Mutual Fund	18,664
BlackRock Strategic Income Opportunities Fund	Mutual Fund	1,136
Cohen & Steers Real Estate Securities Fund	Mutual Fund	7,478
Columbia Select Large Cap Growth Fund	Mutual Fund	3
DFA Emerging Markets Core Equity Fund	Mutual Fund	3,155
DFA Global Real Estate Securities Fund	Mutual Fund	2
DFA Inflation-Protected Securities Fund	Mutual Fund	41,811
DFA International Value Fund	Mutual Fund	145,124
DFA U.S. Large Cap Value Fund	Mutual Fund	4,536
DFA U.S. Small Cap Fund	Mutual Fund	54,968
DFA U.S. Targeted Value Fund	Mutual Fund	1,859
Federated Hermes Government Obligations Premier Fund	Mutual Fund	118,623
* Fidelity 500 Index Fund	Mutual Fund	78,310
* Fidelity Global ex U.S. Index Fund	Mutual Fund	45,555
* Fidelity Inflation-Protected Bond Index Fund	Mutual Fund	4,424
* Fidelity International Index Fund	Mutual Fund	4
* Fidelity Large Cap Growth Index Fund	Mutual Fund	49,536
* Fidelity Large Cap Value Index Fund	Mutual Fund	66,127
* Fidelity Mid Cap Index Fund	Mutual Fund	125,688
Franklin Small Cap Growth Fund	Mutual Fund	15,899
Templeton Global Bond Fund	Mutual Fund	37,582
Goldman Sachs GQP Partners International Opportunities Fund	Mutual Fund	44,878
Janus Henderson Global Life Sciences Fund	Mutual Fund	563
JPMorgan Equity Income Fund	Mutual Fund	2,696
JPMorgan Value Advantage Fund	Mutual Fund	161,955

*Continued on next page**See notes to financial statements and accompanying independent auditor's report.*

THE UNITY COUNCIL 403(b) PLAN**EIN 94-1670490 PLAN #001****SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)****SEPTEMBER 30, 2025****(CONTINUED)**

Identity of issue	Description of investment	Current value
Western Asset Core Bond Fund	Mutual Fund	58,706
Lord Abbett Floating Rate Fund	Mutual Fund	798
NYLI MacKay High Yield Corporate Bond Fund	Mutual Fund	1,021
* Nationwide Invesco Core Plus Bond Fund	Mutual Fund	63,195
* Nationwide Loomis All Cap Growth Fund	Mutual Fund	74,411
* Nationwide Loomis Core Bond Fund	Mutual Fund	51,195
* Nationwide BNY Mellon Dynamic U.S. Equity Income Fund	Mutual Fund	46,770
* Nationwide BNY Mellon Dynamic U.S. Core Fund	Mutual Fund	48,152
PGIM Total Return Bond Fund	Mutual Fund	2,494
PIMCO Income Fund	Mutual Fund	73,795
PIMCO Real Return Fund	Mutual Fund	32,814
Principal Real Estate Securities Fund	Mutual Fund	754
T.Rowe Price Blue Chip Growth Fund	Mutual Fund	127,653
T.Rowe Price Science and Technology Fund	Mutual Fund	17,875
Vanguard Explorer Fund	Mutual Fund	1,651
Vanguard FTSE Social Index Fund	Mutual Fund	63,172
Vanguard Growth Index Fund	Mutual Fund	99,284
Vanguard International Growth Fund	Mutual Fund	46,291
Vanguard Intermediate-Term Bond Fund	Mutual Fund	9,758
Vanguard Mid-Cap Growth Index Fund	Mutual Fund	29,982
Vanguard Mid-Cap Value Index Fund	Mutual Fund	5,263
Vanguard Small-Cap Growth Index Fund	Mutual Fund	10,014
Vanguard Small-Cap Value Index Fund	Mutual Fund	19,084
Vanguard Target Retirement 2020 Fund	Mutual Fund	268,451
Vanguard Target Retirement 2025 Fund	Mutual Fund	935,708
Vanguard Target Retirement 2030 Fund	Mutual Fund	1,300,206
Vanguard Target Retirement 2035 Fund	Mutual Fund	1,332,814
Vanguard Target Retirement 2040 Fund	Mutual Fund	760,296
Vanguard Target Retirement 2045 Fund	Mutual Fund	1,038,975
Vanguard Target Retirement 2050 Fund	Mutual Fund	858,032
Vanguard Target Retirement 2055 Fund	Mutual Fund	821,253
Vanguard Target Retirement 2060 Fund	Mutual Fund	575,708
Vanguard Target Retirement 2065 Fund	Mutual Fund	176,479
Vanguard Target Retirement Income Fund	Mutual Fund	65,580
Vanguard Total International Stock Index Fund	Mutual Fund	2,725
Vanguard Total Stock Market Index Fund	Mutual Fund	6,717
Vanguard Value Index Fund	Mutual Fund	58,723

*Continued on next page**See notes to financial statements and accompanying independent auditor's report.*

THE UNITY COUNCIL 403(b) PLAN

EIN 94-1670490 PLAN #001

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

SEPTEMBER 30, 2025

(CONTINUED)

Identity of issue	Description of investment	Current value
American Beacon International Equity Fund	Mutual Fund	3,791
AB Global Bond Fund	Mutual Fund	11,593
Avantis Emerging Markets Equity Fund	Mutual Fund	11,132
Avantis U.S. Small Cap Value Fund	Mutual Fund	15,870
* Nationwide GQG U.S. Quality Equity Fund	Mutual Fund	68,184
* Fidelity Total International Index Fund	Mutual Fund	19,661
* Nationwide Geneva Mid Cap Growth Fund	Mutual Fund	23,041
Columbia Overseas Value Fund	Mutual Fund	25,106
Prudential Short-Term Corporate Bond Fund	Mutual Fund	111,759
AB High Income Fund	Mutual Fund	2,858
Columbia Commodity Strategy Fund	Mutual Fund	24,467
Invesco Global Real Estate Income Fund	Mutual Fund	30,442
		12,696,828
Nonbenefit-responsive investment contract		
* Best of America Fixed Account	Guaranteed Interest Contract	135,669
* Participant loans	Interest rates from 4.25% to 9.50%, maturity dates from 2025 to 2030	94,245
		\$ 12,926,742

* Indicates a party in interest to the Plan.

See notes to financial statements and accompanying independent auditor's report.

THE UNITY COUNCIL 403(b) PLAN

EIN 94-1670490 PLAN #001

SCHEDULE H, LINE 4a - SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS FOR THE YEAR ENDED SEPTEMBER 30, 2025

Participant Contributions Transferred Late to Plan	Check here if Late Participant Loan Repayments are included	Total that Constitutes Nonexempt Prohibited Transactions:			Total Fully Corrected Under VFCP and PTE 2002-51
		Contributions Not Corrected	Contributions Corrected Outside VFCP*	Contributions Pending Correction in VFCP*	
\$ 562,557 **	✓	\$ -	\$ 562,557	\$ -	-
102,296 ***	✓	-	102,296	-	-
34,498 ^	✓	-	34,498	-	-
1,257 ^^	✓	1,257	-	-	-
\$ 700,608		\$ 1,257	\$ 699,351	\$ -	-

* Voluntary Fiduciary Correction Program

** 2023 contributions deposited on various dates in 2024 and 2025. Earnings deposited to the Plan in January 2025.

*** 2024 contributions deposited on various dates in 2024. Earnings deposited to the Plan in September 2025.

^ 2025 contributions deposited on various dates in 2025. Earnings deposited to the Plan in April and September 2025.

^^ 2025 contributions deposited on various dates in 2025. Earnings have not been deposited to the Plan as of the report date.

See notes to financial statements and accompanying independent auditor's report.